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**FAX TRANSMISSION****DATE:** September 21, 2009**PTO IDENTIFIER:** Application Number 10/523,328  
Patent Number**Inventor:** Kuai et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** ROPES & GRAY LLP  
David P. Halstead, J.D., Ph.D.**PHONE:** (617) 951-7615**Attorney Dkt. #:** WYTH-P01-001**PAGES (Including Cover Sheet):** 11**CONTENTS:** Fee Transmittal (1 page)  
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Amendment in Response to Final Office Action (7 pages)  
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**ROPES & GRAY LLP**  
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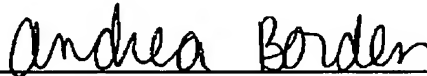
Application No. (if known): 10/523,328

Attorney Docket No.: WYTH-P01-001

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Fee Transmittal (1 page)

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Amendment in Response to Final Office Action (7 pages)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2009</b>		<b>Complete if Known</b> Application Number 10/523,328 Filing Date June 13, 2005 First Named Inventor Jun Kuai Examiner Name G. S. Emch Art Unit 1649 Attorney Docket No. WYTH-P01-001	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 130.00			

## METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify):
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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

## 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims 17 - 36 or HP x Fee (\$)  
 Fee Paid (\$)  
 HP = highest number of total claims paid for, if greater than 20.

Indep. Claims 2 - 12 or HP x Fee (\$)  
 Fee Paid (\$)  
 HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = Extra Sheets / 50 = Number of each additional 50 or fraction thereof Fee (\$)  
 Fee Paid (\$)  
 (round up to a whole number) x

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month

Fees Paid (\$)

130.00

SUBMITTED BY		Registration No.	Telephone
Signature		44,735	(617) 951-7615
Name (Print/Type)	David P. Halstead, J.D., Ph.D.	Date	September 21, 2009

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